PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ROHM AND HAAS COMPANY

In re application of:

Manhua Lin

Group Art Unit: 1625

\$erial No.: 10/731.512 Confirmation No.: 3720

Examiner: Taylor V. Oh

filed: December 9, 2003

RECEIVED **CENTRAL FAX CENTER**

A PROCESS FOR PREPARING A CATALYST AND CATALYTIC

OXIDATION THEREWITH

DEC 2 2 2004

This is a divisional of U.S. Serial No. 09/754,942 filed January 4, 2001**

MAIL STOP: AMENDMENT Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT

\$ir:

For:

In response to the first Office Action mailed July 22, 2004 in connection with the above-identified patent application, Applicant responds as follows. It is noted that a Petition for Extension of Time is being submitted herewith to extend the time for esponse to the aforesaid Office Action for two months, from October 22, 2004, to and including December 22, 2004.

The sections of this Amendment are organized as follows:

AMENDMENTS TO THE CLAIMS are reflected in the listing of claims which begins on bage 2 of this paper.

REMARKS begin on page 5 of this paper.

Docket No.: 99-040A

RECEIVED CENTRAL FAX CENTER

DEC 2 2 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Manhua Lin

Group No.

: 1625

Application No.: 10/731,512

Confirmation No.: 3720

Examiner: Taylor V. Oh

Filed: December 9, 2003.

For: A PROCESS FOR PREPARING A CATALYST AND CATALYTIC

OXIDATION THEREWITH

MAIL STOP AMENDMENT

P.O. Box 1450

Alexandria, Va. 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8

I hereby certify that the papers listed hereinbelow (comprising a total of 13 pages) are being facsimile transmitted to the United States Patent and Trademark Office, at facsimile number (703) 872-9306, on December 22, 2004.

> Amendment Terminal Disclaimer Petition for Extension Fee Transmittal (in duplicate) Certificate of Facsimile Transmission

Date: December 22, 2004

Marcella M. Bodner Attorney for Applicant(s) Registration No. 46, 561

The set the Parametry Residentifies Act of 1985 to convenient an extended to a selected and information indees a direction in which the Conception Act is 1988 to complete the Known Page securing to the Conception Act is 1988 to Complete the Known Page securing to the Conception Act is 1988 to Complete the Known Page securing to the Conception Act is 1988 to Complete the Known Page securing to the Conception Act is 1988 to Complete the Known Page securing to the Conception Account the State of the Conception Act is 1988 to Complete the Conception Account the State of the Conception Act is 1988 to Conception Account Number Page securing to Conception Account Number Page sec			A 4 400C		to exceed to	U.S. Patent and 1	inademark Offic	a: U.S. OEPA	PTO/SB/17 (12-04v2) 7/31/2006. OMB 0651-0032 NT/MENT OF COMMERCE	
FEE TRANSMITTAL FOR TY 2005 Applicant claims small onthy status. See 37 CFR 1.27 Applicant claims small onthy status. See 37 CFR 1.26 Applicant claims small onthy status. See 37 CFR 1.26 Applicant claims small onthy status. See 37 CFR 1.26 Applicant claims small onthy status. See 37 CFR 1.26 Applicant claims small onthy status. See 37 CFR 1.26 Applicant claims small onthy status. See 38 CFR 1.27 Applicant claims small onthy status. See 38 CFR 1.27 Applicant claims see 37 CFR 1.36 Applicant claims small onthy status. See 38 CFR 1.27 Applicant claims small onthy status. See 38 CFR 1.27 Applicant claims spated for, it greater than 3. Applicant claims spated for, it gre	<u>"</u>									
FEE TRANSMITAL Filing Date Dec. 9, 2003 First Nemod Inventor Manhua_Lin Examiner Nome Taylor V. Oh	Fe	Enective ps pursuant to the Consolidate	on 12/08/20 ad Appropria	itions Act. 2005 (H.R. 481	8).	cotlon Number				
FIRST Named Inventor		FFF TRANSMITTAL								
Applicant claims small ontity status. See 37 CFR 1.27 Aut Unit										
Applicant claims small ontity status. See 37 CFR 1.27 Al Unit Albumay Docket No. 97 - 040 A		FUI	F 1 20	005						
METHOD OF PAYMENT (check all that apply)	П	Applicent claims small or	ntity status	. See 37 CFR 1.27					<u> </u>	
METHOD OF PAYMENT (check ell that apply) Check Credit Card Money Order None Other (please Identify): Deposit Account Deposit Account Number: 18-18-50 Deposit Account Nume: Rohm and Hoos Company For the above-identified deposit account, the Director is hereby authorized to: (check ell that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee Cha	TO	TAL AMOUNT OF PAYME	ENT (S)	.580						
Check Credit Card Money Order None Other (please Identify): Deposit Account Deposit Account Number: 18-18-50	\geq				Audi	noy bocket ivo.	<u> </u>	J-14/-		
WANNING: Information on this form may become public. Credit card Information et be included on this form. Provide credit information and suthorization on PTO-2038. FEE CALCULATION		Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 18-18-50 Deposit Account Name: Rohm and Haas Company For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s)								
SASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Fee (5) Fee (6) Fee (6	WA	RNING: Information on this f	orm may be	come public. Credit car	d Informatio	od son blueds no	included on th	ta form, Prov	Alde CLEQIF CHIQ	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES Small Entity Sm			77 70 2000							
Simplication Type	_		H. AND	EXAMINATION FEE	S					
Application Type Fee (5) Fee (6) Fee (6) Fee (7)	1		FILING I	fees se	EARCH FI					
Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65		Application Type	Fee (\$)						Fees Paid (\$)	
Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 2. EXCESS CLAIM FEES fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Tatel Gleima Extra Claima Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Independent claims -20 or HP a (IP a highest number of total claims peld for, if greater than 20. Independent claims -3 or HP a IP = highest number of independent claims peld for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(Utility	300				200 10	0		
Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee (\$)		Design	200	100 10	00 5	50	130 6	5		
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Plant	200	100 30	00 1	50	160 8	0		
2. EXCESS CLAIM FEES fee Description Fee (5) Fee (5)		Reissue	300	150 50	00 2	50	600 30	0		
Fee (5) Fee (6) Fee	1	Provisional	200	100	0	0	0	0	· · · · · · · · · · · · · · · · · · ·	
Other (e.g., late filing surcharge): 2-mo. extension 1450/CFR 1.20(d) - \$130 \$580 Submitted by Signature Registration No. (Attorney/Agent) 46,561 Telephone 215-592-3025	3. [Fee Comparing Fee Comparing Fee Comparing								
SUBMITTED BY Signature Signature Registration No. 46,561 Telephone 215-592-3025							10.CP) - 3.	130	\$580	
Signature Mauslall Codum Registration No. 46,561 Telephone 215-592-3025	سيل		Ä							
(Attorney/Agena)		7.7	100/2	U. Boh			561	Telephone	215-592-3025	
	_		alla I		- L (Attorne	y/Agent) - Tu	,=-:		· · · · · · · · · · · · · · · · · · ·	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tire-Amontx Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in comploting the form, cell 1-800-PTO-9199 and select option 2.

	- Duplicate Copy -							
			Y		II O Dote	A	approved for use throu	PTO/SB/17 (12-04y2 igh 07/31/2006, OMB 0861-003; DEPARTMENT OF COMMERCE
4	Chairman expension and a seem of control of the con						ava a valid OMB control number	
F	Effective on 12/08/2004. se pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10/731,512				
	FEE TRANSMITTAL			Application Number 0/731, Filing Date Dec. 9. 2				
ľ	,	FY 2			First Named In	worder	Manhua	
-					Examiner Nam		Taylor V	7
14	Applicant claims small	entity etetu	. See 37 CFR 1.2	7	Art Unit	~	1625	. Un
Tro	TAL AMOUNT OF PAY	MENT (\$	580		Attorney Docke	t No.	99-0401	9
М	THOD OF PAYMENT	(check al	l that apply)					
	Check Credit C	ard 🔲	Money Order	Non	e Other (plense ide	ntify):	
	Deposit Account De	eposit Accour	t Number 18-1	850				d Haas Company
1						: (check	ell that apply)	The state of the s
	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
	Charge any ac	ditional fee	(s) or underpaymen	its of fe	a/a\ 🔂		mayments	
WAI	under 37 CFR NING: Information on this	form may be	come public. Credit	cerd inf		-	•	Provide credit card
mo	manou sun entrouserion	on PTO-2038			-			
	E CALCULATION	011 AAID						
1.	Basic Filing, Sear	CH, AND I			CH FEES	EYAM	INATION FEES	
	Application Type		mail Entity		Small Entity		Small Entity	
4	Julity	300	Fee (8) 150	Fee (\$)		F06 (Fees Paid (\$)
	Pesign	200	100	100	250	200	100	
	lant	200	100	300	50	130	65	
	Reissue	300	150	500	150 250	160	80	
	rovisional	200	100	0	•	600	300	
	EXCESS CLAIM FEE		100	v	0	0	0	Cmall English
l E	e Description						Fee (\$)	Smail Entity Fee (\$)
1 :	Fach claim over 20 (including Reissues) 50 25						***	
	tach independent claim over 3 (including Reissues) Multiple dependent claims						200 360	100 180
	l	Extra Clain	p Fee (\$)	Fee	Paid (\$)		• • •	spendent Claims
1 -	- 20 or HP = _		- A	•			Fae (\$)	Fee Paid (\$)
	= highest number of total c	esims paid to: Extra Claim		Foe	Paid (\$)			
HE	- 3 or HP =		X	·				
3. 4	PPLICATION SIZE F	FF	peld for, if groater ther					
If	the specification and d	irawings e:	kceed 100 sheets	of pap	er (excluding el	lectronic	ally filed seque	nce or computer
	listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
	sheets or fraction thereof. Sec 35 U.S.C. 41(a)(1)(G) and 37 CFR I.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (5) Fee Paid (6)							
1.	- 100 =		/ 50 =		(round up to a w	hole num	ber) x	
	OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
	ther (e.g., late filing				72/ / 'رسار ا	120C	Disclaimer 1) - \$130	\$ 580
5UBM	TEP BY	Λ			7			
Signet		AND A	Post		egistration No.	ال جا	Talephor	no 215-592-3025
	7-100	All I	P. J.	(A	stomey/Agent)	46,56		
1421110	ריסאני ייייי ריסאני	ella, M	Bodner				Date	Sec. 22, 2004

This collection of information is required by 97 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 97 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the simulating the you neglete this form end/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need escitation in completing the form, call 1-800-PTO-9199 and select option 2.

This Page is Inserted by IFW Indexing and Scanning Operations and is not part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

D	efects in the images include but are not limited to the items checked:
	□ BLACK BORDERS
	☐ IMAGE CUT OFF AT TOP, BOTTOM OR SIDES
	☐ FADED TEXT OR DRAWING
	☐ BLURRED OR ILLEGIBLE TEXT OR DRAWING
	☐ SKEWED/SLANTED IMAGES
	☐ COLOR OR BLACK AND WHITE PHOTOGRAPHS
	GRAY SCALE DOCUMENTS
	☐ LINES OR MARKS ON ORIGINAL DOCUMENT
	☐ REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY
	OTHER:

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.